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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/896,220			ing Date 29/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)									ENTITY [	OTHER THAN OR SMALL ENTITY			
	FOR		JMBER FIL			JMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (c)	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), (		N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E	N/A	N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =					x \$ =		OR	x \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =					x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			ation size fee due tity) for each ction thereof. See							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									11 10			
* If the difference in column 1 is less than zero, enter "0" in column 2.											TOTAL		
APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY OF			OTHER THAN R SMALL ENTITY		
AMENDMENT	12/04/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 49	Minus	<del>**</del> 55	:	= 0		X \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	· 6	Minus	***6		= 0		x \$ =		OR	X \$200=	0	
	Application Size Fee (37 CFR 1.16(s))												
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0 .	
		(Column 1)		(Column 2	2)	(Column 3)							
AMENDMENT	ومرايخ ا م	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)	i	RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 14	Minus	" 55	-			X \$ ' =	1	OR	x \$ =	. 1	
	Independent (37 CFR 1.16(h))	· 2	Minus	•••		-		X \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							• '	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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